

MARIPOSA COUNTY
BOARD OF SUPERVISORS

AGENDA
ACTION FORM

DATE: 5/7/96
AGENDA ITEM NO. CA-4

HUMAN SERVICES DEPARTMENT BY: TOM ARCHER

PHONE: 966-2131

RECOMMENDED ACTION AND JUSTIFICATION: (POLICY ITEM: YES___ NO:x)

Adopt resolution approving and authorizing the Chair and the Mental Health Director to sign Fiscal Year 1995-96 Mental Health Service Contracts with KingsView Corporation for the County Child Abuse Prevention Program (AB 1733) and the American Indian Community Mental Health Program.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board of Supervisors has approved contracting with KingsView for Mental Health services for the past 25 years in a beneficial arrangement permitting the County to provide these State/Federal funded programs in the most efficient, effective manner for the County. The Board approved extending the KingsView Mental Health contract on February 21, 1995 by Res. No. 95-92. These two contracts are for services developed by KingsView and funded through State/Federal grants. All contract services are being provided in a satisfactory manner. These contracts were delayed this year as we awaited final allocation information and then because KingsView was in the process of implementing a new data management system causing a delay in our process. The contract amount is 100% State/Federal funded with no County match required.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

1. Develop and operate a mental health program staffed by County employees.
2. Attempt to locate a different contract services provider and negotiate contract.

COSTS: () Not Applicable

A. Budgeted current FY \$134,871

B. Total anticipated costs \$134,871

C. Required Add'l funding \$ -

D. Source: State & Fed.

SPECIAL INSTRUCTIONS:

List the attachments and number pages accordingly:

Child Abuse contract

Pages 1-8, incl. ins.

American Indian contract

Pages 1-16, incl. ins.

SOURCE: () 4/5ths vote required

A. Internal transfers \$ _____

B. Unanticipated revenues \$ _____

C. Reserve for contingency \$ _____

D. Description: _____

Balance in Reserve for Contingencies, if approved: \$ _____

CLERK'S USE ONLY:

Resolution No.: 96-205

Ordinance No.: _____

Vote - Ayes: 5 Noes: _____

Absent: _____ Abstain: _____

KWS Approved () Denied

() Minute Order Attached

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____

ATTEST: MARGIE WILLIAMS

Clerk of the Board of Supervisors

County of Mariposa, State of CA

By: _____

Deputy Clerk of the Board

ADMINISTRATIVE OFFICER'S RECOMMENDATION:

This item on agenda as:

- Recommended
- Not Recommended
- Policy Determination
- Submitted w/Comment
- Returned for further action

Comment: _____

A.O. Initials: *MW*